

State: Wisconsin

Agency*	Citation(s)	Groups Covered
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B. Optional Groups Other Than the Medically Needy
(Continued)

42 CFR 435.222

☒ b. Reasonable classifications of individuals described in (a) above, as follows:

- ☐ (1) Individuals for whom public agencies are assuming full or partial financial responsibility and who are:
 - ☐ (a) In foster homes (and are under the age of _____).
 - ☐ (b) In private institutions (and are under the age of _____).
 - ☐ (c) In addition to the group under b.(1)(a) and (b), individuals placed in foster homes or private institutions by private, nonprofit agencies (and are under the age of _____).
- ☐ (2) Individuals in adoptions subsidized in full or part by a public agency (who are under the age of _____).
- ☒ (3) Individuals in NFs (who are under the age of 21). NF services are provided under this plan.
- ☒ (4) In addition to the group under (b)(3), individuals in ICFs/MR (who are under the age of 21).

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B. Optional Groups Other Than the Medically Needy
(Continued)

- | | | |
|----------|-----|---|
| <u>X</u> | (5) | Individuals receiving active treatment as inpatients in psychiatric facilities or programs (who are under the age of <u>21</u>). Inpatient psychiatric services for individuals under age 21 are provided under this plan. |
| <u>X</u> | (6) | Other defined groups (and ages), as specified in Supplement 1 of <u>ATTACHMENT 2.2-A</u> . |

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B. Optional Groups Other Than the Medically Needy
(Continued)

1902(a)(10)
(A)(ii)(VIII)
of the Act

☒

8. A child for whom there is in effect a State adoption assistance agreement (other than under title IV-E of the Act), who, as determined by the State adoption agency, cannot be placed for adoption without medical assistance because the child has special needs for medical or rehabilitative care, and who before execution of the agreement--

- a. Was eligible for Medicaid under the State's approved Medicaid plan; or
- b. Would have been eligible for Medicaid if the standards and methodologies of the title IV-E foster care program were applied rather than the AFDC standards and methodologies.

The State covers individuals under the age of--

<input checked="" type="checkbox"/>	21
<input type="checkbox"/>	20
<input type="checkbox"/>	19
<input type="checkbox"/>	18

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Agency	Citation(s)	Groups Covered
		B. <u>Optional Groups Other Than the Medically Needy (continued)</u>
42 CFR 435.223	<input checked="" type="checkbox"/>	9. Individuals described below who would be eligible for AFDC if coverage under the State's AFDC plan were as broad as allowed under Title IV-A:
1902(a)(10)		_____ Individuals under the age of--
(A)(ii) and		_____ 21
1905(a) of		_____ 20
the Act		_____ 19
		_____ 18
		<u>X</u> Caretaker relatives
		_____ Pregnant women

As specified in 42 CFR 435.201 and 435.223, Wisconsin covers as categorically needy those individuals who are caretaker relatives of children under age 18 who meet the income and resource limits of Title IV-A, including those households where the child has been temporarily removed from the home by a court order and the child welfare agency has established a plan for family reunification. When the parent applies and is eligible on this basis, the children who have been removed by a court order will be considered members of the natural or adoptive parent's household and will not be considered members of any other household for Medicaid eligibility purposes, so long as the parent cooperates with the family reunification effort as defined by the child welfare agency.

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B. Optional Groups Other Than the Medically Needy
(Continued)

42 CFR 435.230 /X 10. States using SSI criteria with agreements under sections 1616 and 1634 of the Act.

The following groups of individuals who receive only a State supplementary payment (but no SSI payment) under an approved optional State supplementary payment program that meets the following conditions. The supplement is--

- a. Based on need and paid in cash on a regular basis.
- b. Equal to the difference between the individual's countable income and the income standard used to determine eligibility for the supplement.
- c. Available to all individuals in the State.
- d. Paid to one or more of the classifications of individuals listed below, who would be eligible for SSI except for the level of their income.
 - X (1) All aged individuals.
 - X (2) All blind individuals.
 - X (3) All disabled individuals.

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B. Optional Groups Other Than the Medically Needy
(Continued)

42 CFR 435.230	<u>X</u>	(4)	Aged individuals in domiciliary facilities or other group living arrangements as defined under SSI.
	<u>X</u>	(5)	Blind individuals in domiciliary facilities or other group living arrangements as defined under SSI.
	<u>X</u>	(6)	Disabled individuals in domiciliary facilities or other group living arrangements as defined under SSI.
	<u>X</u>	(7)	Individuals receiving a Federally administered optional State supplement that meets the conditions specified in 42 CFR 435.230.
	<u>X</u>	(8)	Individuals receiving a State administered optional State supplement that meets the conditions specified in 42 CFR 435.230.
	<u>—</u>	(9)	Individuals in additional classifications approved by the Secretary as follows:

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Agency* Citation(s)

Groups Covered

B. Optional Groups Other Than the Medically Needy
(Continued)

The supplement varies in income standard by political subdivisions according to cost-of-living differences.

 Yes.

 X No.

The standards for optional State supplementary payments are listed in Supplement 6 of ATTACHMENT 2.6-A.

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Agency*	Citation(s)	Groups Covered
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B. Optional Groups Other Than the Medically Needy
(Continued)

42 CFR 435.120
435.121
1902(a)(10)
(A)(ii)(XI)
of the Act

☒ 11. Section 1902(f) States and SSI criteria States without agreements under section 1616 or 1634 of the Act.

The following groups of individuals who receive a State supplementary payment under an approved optional State supplementary payment program that meets the following conditions. The supplement is--

- a. Based on need and paid in cash on a regular basis.
- b. Equal to the difference between the individual's countable income and the income standard used to determine eligibility for the supplement.
- c. Available to all individuals in each classification and available on a Statewide basis.
- d. Paid to one or more of the classifications of individuals listed below:

- ☐ (1) All aged individuals.
- ☐ (2) All blind individuals.
- ☐ (3) All disabled individuals.

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B. Optional Groups Other Than the Medically Needy
(Continued)

- (4) Aged individuals in domiciliary facilities or other group living arrangements as defined under SSI.
- (5) Blind individuals in domiciliary facilities or other group living arrangements as defined under SSI.
- (6) Disabled individuals in domiciliary facilities or other group living arrangements as defined under SSI.
- (7) Individuals receiving federally administered optional State supplement that meets the conditions specified in 42 CFR 435.230.
- (8) Individuals receiving a State administered optional State supplement that meets the conditions specified in 42 CFR 435.230.
- (9) Individuals in additional classifications approved by the Secretary as follows:

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B. Optional Groups Other Than the Medically Needy
(Continued)

The supplement varies in income standard by political subdivisions according to cost-of-living differences.

☐ Yes

☐ No

The standards for optional State supplementary payments are listed in Supplement 6 of ATTACHMENT 2.6-A.

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